



Patent

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8/24/01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of

WEBBER, R.

Examiner: HUFF, S.

Serial No: 08/833,506

Group Art: 1642

Filed: 7 April 1997

Paper No: 26

For: IMMUNOASSAY METHOD FOR EMPLOYING
MONOCLONAL ANTIBODY REACTIVE TO
HUMAN iNOS

Atty Dkt: 13934

BOX FEE AMENDMENT
ASST. COMMISSIONER FOR PATENTS
Washington, D.C. 20231

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AMENDMENT
(37 C.F.R §1.115)

Please enter the following amendment:

IN THE CLAIMS:

Please cancel claims 1-21 and add new claims 22-~~42~~⁴¹.

22. A immunoassay method for ~~a~~ analysis sample comprising the steps of:

a. contacting the sample with a specific binding monoclonal antibody reactive to human iNOS; and

b. detecting the presence of human iNOS protein in said sample, said specific binding monoclonal recognizing a region of human iNOS protein.

23. A immunoassay method for analysis of a sample comprising the steps of:

a. contacting the sample with a specific binding entity reactive to human iNOS, said specific binding entity selected from

08/20/2001 HVJONG1 00000103 08833506

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445.00 DP

CERTIFICATE OF MAILING

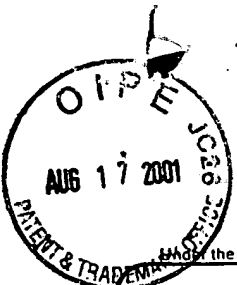
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J. Lampe



GP/1642
#26
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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

Complete if Known

Application Number	08/833,506
Filing Date	7 April 1997
First Named Inventor	WEBBER, R.
Examiner Name	HUFF, S.
Group Art Unit	1642
Attorney Docket No.	3934

TOTAL AMOUNT OF PAYMENT (\$)
445.00

METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number: 02-2273

Deposit Account Name:

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☒ Credit card ☐ Money Order ☐ Other

FEE CALCULATION (continued)

				3. ADDITIONAL FEES		Fee Description	Fee Paid
Large Entity	Small Entity	Fee Code	Fee Code	Fee Code	Fee Code		
105	130	205	65			Surcharge - late filing fee or oath	
127	50	227	25			Surcharge - late provisional filing fee or cover sheet	
139	130	139	130			Non-English specification	
147	2,520	147	2,520			For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*			Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*			Requesting publication of SIR after Examiner action	
115	110	215	55			Extension for reply within first month	
116	390	216	195			Extension for reply within second month	
117	890	217	445			Extension for reply within third month	445.
118	1,390	218	695			Extension for reply within fourth month	
128	1,890	228	945			Extension for reply within fifth month	
119	310	219	155			Notice of Appeal	
120	310	220	155			Filing a brief in support of an appeal	
121	270	221	135			Request for oral hearing	
138	1,510	138	1,510			Petition to institute a public use proceeding	
140	110	240	55			Petition to revive - unavoidable	
141	1,240	241	620			Petition to revive - unintentional	
142	1,240	242	620			Utility issue fee (or reissue)	
143	440	243	220			Design issue fee	
144	600	244	300			Plant issue fee	
122	130	122	130			Petitions to the Commissioner	
123	50	123	50			Processing fee under 37 CFR 1.17(q)	
126	180	126	180			Submission of Information Disclosure Stmt	
581	40	581	40			Recording each patent assignment per property (times number of properties)	
146	710	246	355			Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249	355			For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279	355			Request for Continued Examination (RCE)	
169	900	169	900			Request for expedited examination of a design application	
Other fee (specify) _____							
*Reduced by Basic Filing Fee Paid							
SUBTOTAL (3)							445.00

FEE CALCULATION

1. BASIC FILING FEE						Fee Description	Fee Paid
Large Entity	Small Entity	Fee Code	Fee Code	Fee Code	Fee Code		
101	710	201	355			Utility filing fee	
106	320	206	160			Design filing fee	
107	490	207	245			Plant filing fee	
108	710	208	355			Reissue filing fee	
114	150	214	75			Provisional filing fee	
SUBTOTAL (1)							

2. EXTRA CLAIM FEES

Total Claims: -20** = X =

Independent Claims: -3** = X =

Multiple Dependent: =

Fee from below:

Large Entity	Small Entity	Fee Code	Fee Code	Fee Code	Fee Code	Fee Description	Fee Paid
103	18	203	9			Claims in excess of 20	
102	80	202	40			Independent claims in excess of 3	
104	270	204	135			Multiple dependent claim, if not paid	
109	80	209	40			** Reissue independent claims over original patent	
110	18	210	9			** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)							

*or number previously paid, if greater; For Reissues, see above

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	THEODORE J. BIELEN, JR.	Registration No. (Attorney/Agent)	27,420
Signature	<i>[Signature]</i>	Telephone	(925) 937-1515
		Date	15 AUG 2001

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